

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

ADDRESS (number and street)

1125 17TH ST NW

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00624817

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M / D D / Y Y Y Y Y Y
11 08 2016in the
State of

DC

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 01 2016

through

M M / D D / Y Y Y Y Y Y
10 19 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

HICKEY, BRIAN, E, Mr.,

Type or Print Name of Treasurer

Signature of Treasurer

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 27 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	1786667.00	1786667.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1786667.00	1786667.00
7. Total Disbursements (from Line 31).....	1783687.00	1783687.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2980.00	2980.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	114694.38	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1786667.00	1786667.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1786667.00	1786667.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1786667.00	1786667.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1786667.00	1786667.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1786667.00	1786667.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1783687.00	1783687.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1783687.00	1783687.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1783687.00	1783687.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1786667.00	1786667.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1786667.00	1786667.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 71

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 04 / 2016

Transaction ID : SA11AI.4499

Amount of Each Receipt this Period

1045000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1770000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period

725000.00

☐ Memo Item
DONATION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1786667.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2016

Transaction ID : SA11AI.4501

Amount of Each Receipt this Period

16667.00

☐ Memo Item
DONATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1786667.00

1786667.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. DEFENDING MAIN STREET SUPERPAC INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	6		

Mailing Address 325 7TH STREET, NW
SUITE 610City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00540203

Transaction ID : SB23.4329

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEFENDING MAIN STREET SUPERPAC INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

Mailing Address 325 7TH STREET, NW
SUITE 610City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00540203

Transaction ID : SB23.4330

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HOUSE MAJORITY PAC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	6		

Mailing Address 700 13TH ST NW
SUITE 600City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C C00495028

Transaction ID : SB23.4325

Amount of Each Disbursement this Period

250000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. PRIORITIES USA ACTIONMailing Address 601 13TH STREET NW
SUITE 610NCity
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C C00495861

Transaction ID : SB23.4331

Amount of Each Disbursement this Period

250000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROGRESS UNITED PAC

Mailing Address 2308 MT VERNON AVENUE SUITE 222

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C C00616730

Transaction ID : SB23.4332

Amount of Each Disbursement this Period

16687.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SENATE MAJORITY PACMailing Address 700 13TH ST NW
SUITE 600City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	6		

FEC Identification Number

C C00484642

Transaction ID : SB23.4326

Amount of Each Disbursement this Period

500000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

76687.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. SENATE MAJORITY PACMailing Address 700 13TH ST NW
SUITE 600City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2016					

FEC Identification Number

C C00484642

Transaction ID : SB23.4327

Amount of Each Disbursement this Period

250000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VOTEVETS.ORG ACTION FUNDMailing Address 2201 WISCONSIN AVE NW
#320City
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2016					

FEC Identification Number

C C30001275

Transaction ID : SB23.4333

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WOMEN VOTE!Mailing Address 1800 M STREET, NW
STE 375NCity
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
DONATION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2016					

FEC Identification Number

C C00473918

Transaction ID : SB23.4328

Amount of Each Disbursement this Period

167000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

517000.00

TOTAL This Period (last page this line number only).....▶

1783687.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2016					

FEC Identification Number

C

Transaction ID : SB29.4502

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				13				2016					

FEC Identification Number

C

Transaction ID : SB29.4505

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				14				2016					

FEC Identification Number

C

Transaction ID : SB29.4506

Amount of Each Disbursement this Period

209.93

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2016

FEC Identification Number

C

Transaction ID : SB29.4507

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2016

FEC Identification Number

C

Transaction ID : SB29.4508

Amount of Each Disbursement this Period

209.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
Canvassing Salary & Benefits

001

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2016

FEC Identification Number

C

Transaction ID : SB29.4509

Amount of Each Disbursement this Period

209.93

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2016					

FEC Identification Number

C

Transaction ID : SB29.4510

Amount of Each Disbursement this Period

17.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2016					

FEC Identification Number

C

Transaction ID : SB29.4516

Amount of Each Disbursement this Period

82.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2016					

FEC Identification Number

C

Transaction ID : SB29.4522

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4529

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4535

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4511

Amount of Each Disbursement this Period

17.75

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4517

Amount of Each Disbursement this Period

82.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4523

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4530

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

FEC Identification Number

C

Transaction ID : SB29.4536

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

FEC Identification Number

C

Transaction ID : SB29.4512

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

FEC Identification Number

C

Transaction ID : SB29.4518

Amount of Each Disbursement this Period

82.27

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4524

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4531

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4537

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Category/
Type

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				17				2016					

FEC Identification Number

C

Transaction ID : SB29.4513

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				17				2016					

FEC Identification Number

C

Transaction ID : SB29.4519

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				17				2016					

FEC Identification Number

C

Transaction ID : SB29.4525

Amount of Each Disbursement this Period

64.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4532

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4538

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4514

Amount of Each Disbursement this Period

17.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4520

Amount of Each Disbursement this Period

82.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4526

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4533

Amount of Each Disbursement this Period

35.51

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4539

Amount of Each Disbursement this Period

38.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

VAN OSTERN, COLIN, , Mr.,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4515

Amount of Each Disbursement this Period

17.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.4521

Amount of Each Disbursement this Period

82.26

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

Full Name (Last, First, Middle Initial)

A. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2016					

FEC Identification Number

C

Transaction ID : SB29.4527

Amount of Each Disbursement this Period

64.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

FUMO, OZZIE, , ,Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2016					

FEC Identification Number

C

Transaction ID : SB29.4534

Amount of Each Disbursement this Period

35.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMPSON RYER

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037Purpose of Disbursement
Door Hangers

004

Candidate Name

COHEN, LESLEY, , ,Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			19			2016					

FEC Identification Number

C

Transaction ID : SB29.4540

Amount of Each Disbursement this Period

38.74

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

0.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 OF 71

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

EARN INTERNATIONAL UNION OF OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTERNATIONAL UNION OF OPERATING ENGINEERS

Nature of Debt (Purpose):

Canvassing Salary & Benefits

Mailing Address 1125 17TH ST NW

City
WASHINGTONState
DCZip Code
20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4541

Amount Incurred This Period

105639.24

Payment This Period

0.00

Outstanding Balance at Close of This Period

105639.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LANDMARK STRATEGIES

Nature of Debt (Purpose):

ROBO Calls

Mailing Address 8741 Center Rd

City
SpringfieldState
VAZip Code
22152

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4542

Amount Incurred This Period

922.58

Payment This Period

0.00

Outstanding Balance at Close of This Period

922.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THOMPSON RYER

Nature of Debt (Purpose):

Door Hangers

Mailing Address 2120 L Street, NW, #305.

City
WashingtonState
DCZip Code
20037

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4543

Amount Incurred This Period

8132.56

Payment This Period

0.00

Outstanding Balance at Close of This Period

8132.56

1) **SUBTOTALS** This Period This Page (optional)..... ►

114694.38

2) **TOTALS** This Period (last page this line number only)..... ►

114694.38

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

114694.38

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1125 17TH ST NW		Amount 11651.73	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4110
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
11651.73			
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016	
Mailing Address 1125 17TH ST NW		Amount 2255.26	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4118
Purpose of Expenditure Canvassing Salary & Benefits / Materials		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 12 / 2016
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>52</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
2255.26			
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature HICKEY, BRIAN, E, Mr.,		Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1767.09 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4121 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1767.09</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1259.62 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4277 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1259.62</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]
 Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 25 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>
---	---

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M /

D D /

Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">209.94</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4295 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">209.94</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4420 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: ROSEN, JACKY, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11651.73</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4131 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">24966.77</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4138 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">4616.97</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1767.09</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4144 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3661.59</div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1259.62</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4278 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">2625.69</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

10

27

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">209.94</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4296 Date of Disbursement or Obligation
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">437.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>		Amount
City WASHINGTON		State DC	Zip Code 20036	<div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type 001		Transaction ID : SE.4421 Date of Disbursement or Obligation
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">514.58</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature			[Electronically Filed]		Date
<div style="border: 1px solid black; padding: 2px; text-align: right;">10</div>			<div style="border: 1px solid black; padding: 2px; text-align: right;">27</div>		<div style="border: 1px solid black; padding: 2px; text-align: right;">2016</div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div>
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11651.73</div>		Transaction ID : SE.4132
City WASHINGTON		State DC	Zip Code 20036	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">37359.23</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div>
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2255.26</div>		Transaction ID : SE.4139
City WASHINGTON		State DC	Zip Code 20036	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div>	
Purpose of Expenditure Canvassing Salary & Benefits			Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 52 State: MI
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">6978.68</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,			[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"><div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">M</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">D</div><div style="border: 1px solid black; padding: 2px;">/</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div><div style="border: 1px solid black; padding: 2px;">Y</div></div></div>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1767.09</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4145 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5556.08</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1259.62</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4279 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">3991.76</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 400px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">209.94</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">665.32</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">252.97</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: TITUS, DINA, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">264.64</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> (a) SUBTOTAL of Itemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">0.00</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) SUBTOTAL of Unitemized Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> (a) TOTAL Independent Expenditures </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 150px;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
<i>[Electronically Filed]</i>					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on MM / DD / YYYY					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11651.73</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">49751.69</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9340.39</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____	
<div style="display: flex; justify-content: space-between;"> <div> (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures (a) TOTAL Independent Expenditures </div> <div style="border: 1px solid black; padding: 5px; width: 200px;"> 0.00 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u> [Electronically Filed]				Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 33 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1767.09</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1259.62</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">784.83</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11651.73</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">62144.15</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., _____ Signature				[Electronically Filed] Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">11702.10</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1767.09</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">9345.06</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 36 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 1125 17TH ST NW		Amount 1259.62	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4281
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 6723.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016	
Mailing Address 1125 17TH ST NW		Amount 209.94	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4299
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought 910.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
HICKEY, BRIAN, E, Mr., Signature		[Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">164.52</div>		
City WASHINGTON		State DC	Zip Code 20036	Transaction ID : SE.4423 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSEN, JACKY, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">957.99</div>	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">88.45</div>		
City WASHINGTON		State DC	Zip Code 20036	Transaction ID : SE.4426 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type 001	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TITUS, DINA, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">360.85</div>	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11651.73</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4135 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">74536.61</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee INTERNATIONAL UNION OF OPERATING ENGINEERS <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 1125 17TH ST NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2255.26</div>		
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4142 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Canvassing Salary & Benefits		Category/ Type <div style="border: 1px solid black; padding: 2px;">001</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>52</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">14063.81</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1767.09</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4147 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">11239.55</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1259.62</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4282 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: NH	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">8089.97</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

/ /

10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 40 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">209.94</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1138.42</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 1125 17TH ST NW				Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">252.97</div>	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type <div style="border: 1px solid black; padding: 2px;">001</div>	
Name of Federal Candidate: TITUS, DINA, , ,				Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">617.70</div>				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
(a) SUBTOTAL of Itemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures				<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
HICKEY, BRIAN, E, Mr., Signature				Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">11408.50</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4136 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2255.26</div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4143 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>52</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 1125 17TH ST NW				Amount 1767.09	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 13134.04				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016	
Mailing Address 1125 17TH ST NW				Amount 9630.40	
City WASHINGTON		State DC		Zip Code 20036	
Purpose of Expenditure Canvassing Salary & Benefits				Category/Type 001	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 128886.15				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%; text-align: right;"> 0.00 </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u> [Electronically Filed]				Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 43 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2255.26 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4185 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 52 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">19244.62</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item INTERNATIONAL UNION OF OPERATING ENGINEERS		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>	
Mailing Address 1125 17TH ST NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 883.55 </div>	
City WASHINGTON	State DC	Zip Code 20036	Transaction ID : SE.4186 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 21 / 2016 </div>
Purpose of Expenditure Canvassing Salary & Benefits		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">14873.78</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 44 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item LANDMARK STRATEGIES			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 8741 Center Rd			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">922.58</div>		
City Springfield	State VA	Zip Code 22152			
Purpose of Expenditure Live Calls		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4130 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">13315.04</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>19<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">740.73</div>		
City Washington	State DC	Zip Code 20037			
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : SE.4127 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>12<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">12392.46</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

10

27

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4158 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.41</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4168 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type 004	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4285 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure DOOR HANGERS		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose HASSAN, MARGARET WOOD, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1366.07</div>	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		
Mailing Address 2120 L Street, NW, #305.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
City Washington State DC Zip Code 20037			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17.75</div>		
Purpose of Expenditure DOOR HANGERS		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	Transaction ID : SE.4303 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SHEA-PORTER, CAROL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>			
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">227.69</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3.89 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4414 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.89</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8.64 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4437 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 12 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">261.61</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 5.31		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4444 Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: KIHUEN, RUBEN, ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 5.31			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 740.73		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4151 Date of Disbursement or Obligation MM / DD / YYYY 10 / 13 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 25707.50			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.45 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4159 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4723.42</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 127.40 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4171 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>
Purpose of Expenditure Door Hangers		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3788.99</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(a) TOTAL Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 106.45 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4286
Purpose of Expenditure DOOR HANGERS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2732.14</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 17.75 </div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4304
Purpose of Expenditure DOOR HANGERS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 13 / 2016 </div>
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">455.38</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3.89</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4415 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">7.78</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8.64</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4439 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>13<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">523.22</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

10

27

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 52 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on M M / D D / Y Y Y Y Y Y														
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016										
Mailing Address 2120 L Street, NW, #305.				Amount 5.31										
City Washington		State DC		Zip Code 20037										
Purpose of Expenditure Door Hangers				Category/Type 004										
Name of Federal Candidate: KIHUEN, RUBEN, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV										
Calendar Year-To-Date Per Election for Office Sought 10.62				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2016										
Mailing Address 2120 L Street, NW, #305.				Amount 740.73										
City Washington		State DC		Zip Code 20037										
Purpose of Expenditure Door Hangers				Category/Type 004										
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____										
Calendar Year-To-Date Per Election for Office Sought 38099.96				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">0.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>HICKEY, BRIAN, E, Mr.,</u>				Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016										

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington State DC Zip Code 20037		Transaction ID : SE.4160 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
Purpose of Expenditure Door Hangers		Category/Type 004		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose DRISKELL, GRETCHEN, , ,	
Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7085.13</div>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.40</div>		
City Washington State DC Zip Code 20037		Transaction ID : SE.4172 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
Purpose of Expenditure Door Hangers		Category/Type 004		Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MASTO, CATHERINE CORTEZ, , ,	
Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5683.48</div>			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) SUBTOTAL of Itemized Independent Expenditures</p> <p>(a) SUBTOTAL of Unitemized Independent Expenditures</p> <p>(a) TOTAL Independent Expenditures</p> </div> <div style="width: 35%;"> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;">0.00</div> <div style="border: 1px solid black; padding: 2px; text-align: right; margin-bottom: 10px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 106.45		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4287 Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2016		
Purpose of Expenditure DOOR HANGERS		Category/ Type 004			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 4098.21			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 17.74		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4305 Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2016		
Purpose of Expenditure DOOR HANGERS		Category/ Type 004			
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 683.06			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2016	
Mailing Address 2120 L Street, NW, #305.			Amount MM / DD / YYYY 3.89	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4416 Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2016	
Purpose of Expenditure Door Hangers		Category/Type 004		
Name of Federal Candidate: TITUS, DINA, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 11.67			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2016	
Mailing Address 2120 L Street, NW, #305.			Amount MM / DD / YYYY 8.64	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4440 Date of Disbursement or Obligation MM / DD / YYYY 10 / 14 / 2016	
Purpose of Expenditure Door Hangers		Category/Type 004		
Name of Federal Candidate: ROSEN, JACKY, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 531.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			MM / DD / YYYY 0.00	
(a) SUBTOTAL of Unitemized Independent Expenditures			MM / DD / YYYY	
(a) TOTAL Independent Expenditures			MM / DD / YYYY	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>HICKEY, BRIAN, E, Mr.,</u>			Date MM / DD / YYYY 10 / 27 / 2016	
[Electronically Filed]				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report <input type="checkbox"/> Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 14 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5.31 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4446 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 14 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 04 State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">15.93</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 740.73 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4154 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 17 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate <input type="checkbox"/> House District: State:		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">50492.42</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4162 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">9446.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">127.40</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4173 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">7577.97</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature HICKEY, BRIAN, E, Mr.,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">10</div> <div style="width: 15%;">17</div> <div style="width: 70%;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">106.45</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure DOOR HANGERS				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">5464.28</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER				Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">10</div> <div style="width: 15%;">17</div> <div style="width: 70%;">2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.				Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">17.74</div>	
City Washington		State DC		Zip Code 20037	
Purpose of Expenditure DOOR HANGERS				Category/Type <div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">700.80</div>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u> [Electronically Filed]				Date <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 15%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 15%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 70%;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="width: 15%;">10</div> <div style="width: 15%;">27</div> <div style="width: 70%;">2016</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.88</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4417 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TITUS, DINA, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">268.52</div>	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8.64</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4441 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSEN, JACKY, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">793.47</div>	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
(a) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 5.31		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4447 Date of Disbursement or Obligation MM / DD / YYYY 10 / 17 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 21.24			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 740.73		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4155 Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 62884.88			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4163 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 18 / 2016</div> </div>
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 52 State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">11808.55</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 19 / 2016</div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">127.40</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4174 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div>10 / 18 / 2016</div> </div>
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">9472.46</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature
 HICKEY, BRIAN, E, Mr.,

[Electronically Filed]

Date

/ /

10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 71
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 18 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text" value="Amount"/> 106.45	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4289
Purpose of Expenditure DOOR HANGERS		Category/ Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 18 / 2016
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="Amount"/> 6830.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 18 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount <input type="text" value="Amount"/> 17.74	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4307
Purpose of Expenditure DOOR HANGERS		Category/ Type <input type="text" value="004"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 18 / 2016
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="Amount"/> 928.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="Amount"/> 0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text" value="Amount"/>
(a) TOTAL Independent Expenditures	<input type="text" value="Amount"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ C C00624817	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 3.88	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4418
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Name of Federal Candidate: TITUS, DINA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 272.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee THOMPSON RYER <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016	
Mailing Address 2120 L Street, NW, #305.		Amount 8.64	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4442
Purpose of Expenditure Door Hangers		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 18 / 2016
Name of Federal Candidate: ROSEN, JACKY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 966.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature HICKEY, BRIAN, E, Mr.,
[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 18 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 5.31		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4448 Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: KIHUEN, RUBEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 26.55			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 740.72		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4156 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 75277.33			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>19<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">106.45</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4166 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>19<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 52 State: MI		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">14170.26</div>		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>19<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">127.40</div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4176 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/>10<input type="text"/></div> <div><input type="text"/>19<input type="text"/></div> <div><input type="text"/>2016<input type="text"/></div> </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>			
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: State: NV		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">11366.95</div>		

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,

Signature

[Electronically Filed]

Date

10

27

2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 106.45		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4291 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016		
Purpose of Expenditure DOOR HANGERS		Category/ Type 004			
Name of Federal Candidate: HASSAN, MARGARET WOOD, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 8196.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 17.74		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4308 Date of Disbursement or Obligation MM / DD / YYYY 10 / 19 / 2016		
Purpose of Expenditure DOOR HANGERS		Category/ Type 004			
Name of Federal Candidate: SHEA-PORTER, CAROL, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought 1156.16			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		<u>[Electronically Filed]</u>		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 18 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3.88 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4419 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TITUS, DINA, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">364.73</div>		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 8.64 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4443 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSEN, JACKY, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">975.27</div>		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HICKEY, BRIAN, E, Mr.,
 Signature

[Electronically Filed]
 Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y / / / </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5.31 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4449 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KIHUEN, RUBEN, , ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">31.86</div>		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 19 / 2016 </div>		
Mailing Address 2120 L Street, NW, #305.			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 740.71 </div>		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4157 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 </div>		
Purpose of Expenditure Door Hangers		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY, RODHAM, ,		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">87426.54</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		
(a) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(a) TOTAL Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right;"> New report Amends report filed on MM / DD / YYYY </div>					
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 106.45		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4167 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: DRISKELL, GRETCHEN, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 16531.97			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2016		
Mailing Address 2120 L Street, NW, #305.			Amount 127.40		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4177 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2016		
Purpose of Expenditure Door Hangers		Category/ Type 004			
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, , ,			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought 13261.44			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		[Electronically Filed]		Date MM / DD / YYYY 10 / 27 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">31829.21</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4179 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>
Purpose of Expenditure Postage / Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	
Name of Federal Candidate: CLINTON, HILLARY, RODHAM, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">119255.75</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
Mailing Address 2120 L Street, NW, #305.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">457.39</div>	
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4180 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>
Purpose of Expenditure Poatage /Production Mail Pieces		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	
Name of Federal Candidate: DRISKELL, GRETCHEN, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 52 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MI	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">16989.36</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
(a) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
(a) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	
[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00624817 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <div style="float: right; text-align: right;"> New report Amends report filed on MM / DD / YYYY </div>				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item THOMPSON RYER		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2016		
Mailing Address 2120 L Street, NW, #305.		Amount 728.79		
City Washington	State DC	Zip Code 20037	Transaction ID : SE.4181 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2016	
Purpose of Expenditure Postage /Production Mail Pieces		Category/Type 006		
Name of Federal Candidate: MASTO, CATHERINE CORTEZ, ,		<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address		Amount 		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure		Category/Type 		
Name of Federal Candidate:		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures		0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures		0.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>HICKEY, BRIAN, E, Mr.,</u>		Date MM / DD / YYYY 10 / 27 / 2016		

[Electronically Filed]